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|  | Αρργογ   | PTO/SB/30 (10-07<br>ed for use through 10/31/2007. OMB 0651-003                     |     |
| A DEAL STATE THE Paperwork Reduction Act of 1995, no persons are requi   | U.S. Patent and Tradema  | ark Office; U.S. DEPARTMENT OF COMMERC  | E   |
| Request  | Application Number   | 10/781,047-Conf. #8390  |     |
| for  | Filing Date  | February 17, 2004   |     |
| Continued Examination (RCE)<br>Transmittal   | First Named Inventor   | Steven P. Gygi  |     |
| Address to:  | Art Unit   | 1657  | -   |
| Mail Stop RCE<br>Commissioner for Patents  | Examiner Name  | B. Shen   |     |
| P.O. Box 1450<br>Alexandria, VA 22313-1450   | Attorney Docket Numbe  | r 57559(70207)  |     |
| This is a Request for Continued Examination (RCE) a<br>Request for Continued Examination (RCE) practice under 3<br>8, 1995, or to any design application.  | under 37 CFR 1.114 of the abov   | ve-identified application.  | ]   |
| 1. Submission required under 37 CFR 1.114 No<br>amendments enclosed with the RCE will be entered in<br>applicant does not wish to have any previously filed u<br>amendment(s).   | n the order in which they were filed<br>nentered amendment(s) entered, a | unless applicant instructs otherwise. If<br>pplicant must request non-entry of such |     |
| a. Previously submitted. If a final Office a may be considered as a submission ev  | en if this box is not checked.   |   |     |
| i. Consider the arguments in the Appe<br>ii. Other   | al Brief or Reply Brief previous   | y filed on  |     |
| b. X Enclosed  |  |   |     |
| i. × Amendment/Reply   | iii. Information Disclos   | sure Statement (IDS)  |     |
| ii. Affidavit(s)/Declaration(s)  | iv. Other  |   |     |
| 2. Miscellaneous   |  |   |     |
| a. Suspension of action on the above-ide   |  |   |     |
|  | of suspension shall not exceed 3 r                                       | nonths; Fee under 37 CFR 1.17(i) required)  |     |
| b. Other<br>3 Fees The RCE fee under 37 CFR 1.17(e) is re  | nuired by 27 CEP 1 114 when th   | e RCE is filed  |     |
|  |  |   |     |
| a. X The Director is hereby authorized to ch<br>overpayments to Deposit Account No.  | 04-1105 I have en  |   |     |
| i. X RCE fee required under 37 CFR 1.  | 17(e)  |   |     |
| ii. Extension of time fee (37 CFR 1.13   | 6 and 1.17)  |   |     |
| iiiOther   |  |   |     |
| b Check in the amount of \$  | enclosed   |   |     |
| c. Payment by credit card (Form PTO-203  |  |   |     |
| WARNING: Information on this form may become public<br>credit card information and authorization on PTO-2038.  | :. Credit card information should  | not be included on this form. Provide   |     |
| SIGNATURE OF APPLIC  | ANT, ATTORNEY, OR AGEN   | IT REQUIRED   | า้  |
| Signature 8  |  | October 30, 2007  | 1   |
| Name (Print/Type) Sregory B. Butler, Ph.D.,  | JSUL   | stration No. 34,558   | -   |
| Biegory B. Dutter, Fil.D.,   |  |   | 4   |
| I hereby certify that this paper (along with any paper referred to Express Mail, Label No. EM 054399161 US, on the date show MS RCE, Commissioner for Patents, P.O. Box 1450, Alexand Dated: October 30, 2007 Signature: | n below in an envelope addressed to                                      |   |     |
|  | your que   |   | IJ  |
| 01/2007 HVUDNG1 00000033 041105 10781047   |  |   |     |

| OIPE                  | . i<br>\ i  |                 |                        |                             |   |          |                         |                |                  |                                    |                  |
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| 0 44<br>44            |   |                 |                        |                             |   |          |                         | <b>A</b> = = = |                  |                                    | O/SB/17 (10-07)  |
| OCT 3 0 7007          |   | nonwork Poducti | on Act of 199          |                             | quirod to   |          | U.S. Pateni             | t and Trade    | mark Office: U.S | Dugh 06/30/2010. C<br>DEPARTMENT O | F COMMERCE       |
| HI COLORIDA           |   |                 |                        |                             | respond to a collection of information unless it displays a valid OMB control number<br>Complete if Known |          |                         |                |                  |                                    |                  |
| A CALLER AND A CALLER | Effective on 12/08/2004.<br>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). |                 |                        |                             |   |          | '-Conf. #8390           |                |                  |                                    |                  |
| <b>AND HERE</b>       | FEE TRANSMITTAL   |                 |                        |                             | Filing Date Fe  |          |                         | February 1     | ebruary 17, 2004 |                                    |                  |
|                       | For FY 2007   |                 |                        |                             | First Named Inventor S  |          |                         | Steven P. (    | Steven P. Gygi   |                                    |                  |
|                       |   |                 |                        |                             |   |          |                         | B. Shen        |                  |                                    |                  |
| -                     | X Applicant claims small entity status. See 37 CFR 1.27   |                 |                        |                             | 7.000.000   |          |                         | 1657           |                  |                                    |                  |
|                       | TOTAL AMOUNT OF PAYMENT (\$) 405.00   |                 |                        |                             | Attomey Docket No. 5  |          |                         | 57559(70207)   |                  |                                    |                  |
|                       | METHOD OF   | PAYMENT         | (check all             | that apply)                 |   |          |                         |                |                  |                                    |                  |
|                       | Check   | Credit Ca       | rd ]                   | Money Order                 | Nor   | ne       | Other (                 | please ident   | ify):            |                                    |                  |
|                       | X Deposit Ac  | count Deposit   |                        | ber: 04-                    | <br>1105  |          | Denosit.                | Account Nam    | Edwards          | Angell Palmer                      | r & Dodge        |
|                       |   |                 |                        | account, the D              |   | here     |                         |                |                  |                                    |                  |
|                       |   | harge fee(s) ii | -                      |                             |   |          | ć –                     | •              | •                | w, except for th                   | ne filing fee    |
|                       |   | harge any add   | litional fee(          | s) or underpay              | ments of  | f        |                         | any over       | avments          | •                                  | •                |
|                       | fe  | e(s) under 37   |                        |                             |   |          |                         |                |                  |                                    |                  |
|                       | FEE CALCU   |                 |                        |                             |   |          |                         |                |                  |                                    |                  |
|                       | T. DASIC FILIN  | G, SEARCH,      |                        | IG FEES                     |   | ARCH     | I FEES                  | EXAMI          | NATION FE        | FS                                 |                  |
|                       |   |                 |                        | Small Entity                |   | Si       | mall Entity             |                | Small Enti       | ity                                |                  |
|                       | Application T<br>Utility  | <u>ype</u>      | <u>Fee (\$)</u><br>310 | <u>Fee (\$)</u><br>155      | Fee (\$<br>510  | 2        | Fee (\$)                | Fee (\$)       |                  | Fees P                             | <u>Paid (\$)</u> |
|                       | Design  |                 | 210                    | 105                         | 100   |          | 255<br>50               | 210<br>130     | 105<br>65        |                                    |                  |
|                       | Plant   |                 | 210                    | 105                         | 310   |          | 155                     | 160            | 80               | ········                           |                  |
|                       | Reissue   |                 | 310                    | 155                         | 510   |          | 255                     | 620            | 310              |                                    |                  |
|                       | Provisional   |                 | 210                    | 105                         | 0   |          | 0                       | 020            | 0                |                                    |                  |
| -                     | 2. EXCESS CL  | AIM FEES        |                        | 100                         | Ū   |          | Ū                       | Ŭ              | Ū                |                                    | Small Entity     |
|                       | Fee Description   |                 |                        |                             |   |          |                         |                |                  | Fee (\$)                           | Fee (\$)         |
|                       | Each claim over   | •               | -                      | ,                           |   |          |                         |                |                  | 50                                 | 25               |
|                       | Each independe  |                 | 3 (includi             | ng Reissues)                |   |          |                         |                |                  | 210                                | 105              |
|                       | Multiple dependent claims   |                 |                        |                             |   |          |                         |                | 370              | 185                                |                  |
|                       |   |                 |                        |                             |   | Paid (   | ») <u> </u>             | _              |                  | ndent Claims<br>Fee Paid (\$       | <b>`</b>         |
|                       | - 20 = x =<br>HP = highest number of total claims paid for, if greater than 20.                     |                 |                        |                             |   |          |                         | <u> </u>       | <u>ee (\$)</u>   | <u>ree raiu (ş</u>                 | 1                |
|                       | Indep. Claims   | Extra Cl        | aims I                 | Fee (\$)                    | Fee F   | aid (    | 5)                      |                |                  |                                    | -                |
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|                       | 3. APPLICATIO   |                 | nt claims paid         | o for, if greater that      | 13.   |          |                         |                |                  |                                    |                  |
|                       | If the specifica  |                 | vings excee            | ed 100 sheets o             | f paper (   | (exclu   | ding electro            | onically f     | iled sequence    | e or computer                      |                  |
|                       | listings und  | er 37 CFR 1.:   | 52(e)), the            | application siz             | e fee du  | e is \$2 | 260 (\$130 f            | or small e     | entity) for eac  | h additional 50                    | )                |
|                       |   |                 |                        | J.S.C. 41(a)(1)             |   |          |                         |                |                  |                                    |                  |
|                       | Total Sheet   |                 | <u>ra Sheets</u>       | /50 =                       |   |          | nal 50 or frac          |                |                  | <u>Fee F</u>                       | Paid (\$)        |
|                       | 4. OTHER FEE  |                 |                        | /30                         |   | (round   | up to a who             | ne number)     | ×                | =<br>Fees l                        | Paid (\$)        |
|                       |   |                 | n, \$130 fe            | e (no small ent             | ity disco   | ount)    |                         |                |                  |                                    |                  |
|                       | -   |                 |                        | 301 Request 1               | •   |          | examinat                | ion (RCE       | E) (see 37       | 40                                 | 5.00             |
|                       | SUBMITTED BY  |                 |                        |                             |   |          |                         |                |                  |                                    |                  |
|                       | Signature   | Unca            | o B.                   | Sit                         | -   |          | ration No.<br>ey/Agent) | 34,558         | Telephone        | (617) 517                          | '-5595           |
|                       | Name (Print/Type)   | Gregory B.      |                        | h.D., Esq.                  | R   |          |                         |                | Date             | October 3                          | 0, 2007          |
| 1                     |   | • •             |                        |                             |   |          |                         |                |                  |                                    |                  |

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